

MAIL TO:
Registry of Charitable Trusts
P.O. Box 903447
Sacramento, CA 94203-4470
Telephone: (916) 445-2021

WEB SITE ADDRESS:
<http://ag.ca.gov/charities/>

REGISTRATION/RENEWAL FEE REPORT TO ATTORNEY GENERAL OF CALIFORNIA

Sections 12586 and 12587, California Government Code
11 Cal. Code Regs. Sections 311 and 312

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties as defined in Government Code Section 12586.1.



RRF-1 EXTENSIONS WILL NOT BE GRANTED

Enter State Charity Registration Number, Name, and Address of Organization: State Charity Registration Number: <u>97830</u> <u>The California Endowment</u> Name of Organization <u>21650 Oxnard Street, Suite 1200</u> Address (Number and Street) <u>Woodland Hills, CA 91367</u> City or Town, State and Zip Code	Check if: <input type="checkbox"/> Change of address <input checked="" type="checkbox"/> Amended report Corporate or Organization No. <u>1930013</u> Federal Employer I.D. No. <u>95-4523232</u>
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PART A - ACTIVITIES

- | | Yes | No |
|---|-------------------------------------|--------------------------|
| 1. During your most recent full accounting period did your gross receipts or total assets equal \$100,000 or more? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Note: If the answer is yes, you are required by Title 11 of the California Code of Regulations, §§311 and 312, to attach a check in the amount of \$25.00 to this report. Make check payable to Department of Justice. | | |
| 2. For your most recent full accounting period (beginning <u>03 / 01 / 2002</u> ending <u>02 / 28 / 2003</u>) list:
Gross receipts \$ <u>3,711,054,919</u> Total assets \$ <u>2,762,621,100</u> Actual <input checked="" type="checkbox"/> Estimated <input type="checkbox"/> | | |

PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT

Note: If you answer "yes" to any of the questions below, you must attach a separate sheet providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.

- | | Yes | No |
|---|--------------------------|-------------------------------------|
| 1. During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof either directly or with an entity in which any such officer, director or trustee had any financial interest? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2. During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3. During this reporting period, did non-program expenditures exceed 50% of gross revenues? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 4. During this reporting period, were any organization funds used to pay any penalty, fine or judgment? If you filed a Form 4720 with the Internal Revenue Service, attach a copy. | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5. During this reporting period, were the services of a professional fund-raiser or fund-raising counsel used? If "yes," provide an attachment listing the name, address, and telephone number of the service provider. | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 6. During this reporting period, did the organization receive any governmental funding? If so, provide an attachment listing the name of the agency, mailing address, contact person, and telephone number. | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 7. During this reporting period, did the organization hold a raffle for charitable purposes? If "yes," provide an attachment indicating the number of raffles and the date(s) they occurred. | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 8. Does the organization conduct a vehicle donation program? If "yes," provide an attachment indicating whether the program is operated by the charity or whether the organization contracts with a commercial fund-raiser. | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

Organization's area code and telephone number (818) 703 - 3311

Organization's e-mail address _____

I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, it is true, correct and complete.

Signature of authorized officer

Rakesh Varma
Printed Name

Chief Financial Officer
Title

10/13/2003
Date

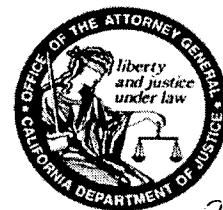
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RRF-1 EXTENSIONS WILL NOT BE GRANTED

Enter State Charity Registration Number, Name, and Address of Organization:

State Charity Registration Number: 97834

The California Endowment

Name of Organization

21650 Oxnard Street, Suite 1200

Address (Number and Street)

Woodland Hills, CA 91367

City or Town, State and Zip Code

Check if:

☐ Change of address

☐ Amended report

Corporate or Organization No. 1930013

Federal Employer I.D. No. 95-4523232

PART A - ACTIVITIES

Yes No

1. During your most recent full accounting period did your gross receipts or total assets equal \$100,000 or more?

☒ ☐

Note: If the answer is yes, you are required by Title 11 of the California Code of Regulations, §§311 and 312, to attach a check in the amount of \$25.00 to this report. Make check payable to Department of Justice.

2. For your most recent full accounting period (beginning 03 / 01 / 2002 ending 02 / 28 / 2003) list:

Gross receipts \$ 3,711,027,919 Total assets \$ 2,762,471,100 Actual ☐ Estimated ☒

PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT

Note: If you answer "yes" to any of the questions below, you must attach a separate sheet providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.

1. During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof either directly or with an entity in which any such officer, director or trustee had any financial interest?

Yes No
☐ ☒

2. During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?

☐ ☒

3. During this reporting period, did non-program expenditures exceed 50% of gross revenues?

☐ ☒

4. During this reporting period, were any organization funds used to pay any penalty, fine or judgment? If you filed a Form 4720 with the Internal Revenue Service, attach a copy.

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☐ ☒

8. Does the organization conduct a vehicle donation program? If "yes," provide an attachment indicating whether the program is operated by the charity or whether the organization contracts with a commercial fund-raiser.

☐ ☒

Organization's area code and telephone number (818) 703 - 3311

Organization's e-mail address llem@calendow.org

I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, it is true, correct and complete.

Rakesh Varma

Chief Financial Officer

06/26/2003

Signature of authorized officer

Printed Name

Title

Date